10653.002

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Number

DECLARATION FOR LITH ITY OR

Attorney Docket

DESIGN	First Named Inventor	Cassia, Simon Hugh								
PATENT APPLICATION	COM	PLETE IF KNOWN								
(37 CFR 1.63)	Application Number	10/524,504								
Declaration	Filing Date	02/14/2005								
Submitted OR Submitted after Initial With Initial Filing (surcharge	Art Unit									
Filing (37 CFR 1.16 (e)) required)	Examiner Name									
I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original an which a patent is sought on the invention entitled:	d first inventor(s) of the subject	t matter which is claimed and for								
METHOD AND APPARATUS FOR PRELO	ADING CACHES									
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	of the Invention)									
the specification of which	•	*								
is attached hereto										
	OR .									
OR										
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[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

Direct all OR Correspondence The address 20576 address below associated with correspondence to: **Customer Number:** Name **Address** ZIP City State Email Country Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle [if any]) Simon Hugh Inventor's Signature 25**3**02005 Citizenship Country Residence: City State Great Britain / British Petersfield Hants Malling Address Stable Cottage, Upper Bordean House, Bordean Country State Petersfield **GU32 1ET** Great Britain A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name or Surname Given Name (first and middle [if any]) Keith Charles Day Inventor's Signature Citizenship Residence: City Country British Great Britain_ Basingstoke. Hamoshire Mailing Address 12 Barron Place State Zip Country City RG24 9JS **Great Britain** Basingstoke Hampshire supplemental sheet(s) PTO/SB/02A or 02LR attached hereto. Additional inventors or a legal representative are being named on the 1

[Page 2 of 2]

PTO/SB/02A (09-04)

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DECLARATION	ADDITIONAL Supplemental Si	. INVENTOR(S) heat	Page	Page 3 of 3		
Name of Additional Joint Inventor, if an	y:	A petition h	nas been filed for this	unsigned i	inventor	
Given Name (first and middle (if any		Family Name or	Sumame			
Simon Devid	<u> </u>	Wood				
triventor's Signature		<i>X</i>		Date		
Brackneti Residence: City	Berkshire State	Great Cou	t Britain	British Cltizer	nship	
33 Eddington Road						
Malling Address						
Bracknell City	Berkshire State		RG21 8GF	Great E	-	
Name of Additional Joint Inventor, if an		A petition (has been filed for this			
Given Name (first and middle (if any	·))	Family Name or Surname				
Inventor's Signature				Date		
Residence: City	State		Country		Citizenship	
Mailing Address					· .	
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CRy Name of Additional Joint Inventor, if ar	State	A petition has been filed for this unsigned inventor				
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inventor's Signature	*		•	Date		
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PTO/SB/81 (04-05)
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ed to respond to a collection of info	emation unless it displays a valid OMB control number.
Application Number	10/524,504
Filing Date	02/14/2005
First Named Inventor	Cassia, Simon Hugh
Title	Method and Apparatus'tor Preloading
Art Unit	
Examiner Name	
Afterney Docket Number	10653.002

I hereby revoke all previous powers of attorney given in the above-identified application.									
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		the entire interest. See 37 CFI FR 3.73(b) is enclosed. (Form		96)				<u>-</u>	
		SIGNATURE of	Applican	nt or Assignee	of Record			-	
Signature	Su	han Cerbic.				Date		360 JOS 2	
Name		Hugh Cassia				Telephone	144	+ 786797478	7
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NOTE: Signatures of all signature is required, se	the invento below*.	rs or assignees of record of the en	tire interest	or their represent	ative(s) are require	d. Submit m	nultiple f	orms if more than o	ne
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Application Number	10/524,504
Filing Date	02/14/2005
First Named Inventor	Cassia, Simon Hugh
Titie ~	Method and Apparatus for Preloading
Art Unit	
Examiner Name	
Attorney Docket Number	10653.002

I hereby r	evoke all previo	ous powers of attorney gi	iven in th	ne above-ide	entified applic	ation.			
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		the entire interest. See 37 CFF FR 3.73(b) is enclosed. (Form		96)					
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First Named inventor	Cassia, Simon Hugh
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Examiner Name	
Attorney Docket Number	10853.002

I hereby revoke all previous powers of attorney given in the above-identified application.								
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Signature	501					Date	19 SEP 2005	
Name	Simon David Wood					Telephone	+44 118 973 8220	
Title and Company	CTO, FLYINGS	PARK						
NOTE: Signatures of all the signature is required, see		ord of the entire interes	t or their	represent	ative(s) are require	ed. Submit m	utliple forms if more than one	
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Tittle	Method and Apparatus for Preloading
Art Unit	
Examiner Name	
Attorney Docket Number	10653,002

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Statement un	der 37 C	FR 3.73(b) is enclosed. (Form	PTO/SB/96)					·· · · · · · · · · · · · · · · · · · ·	
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PTO/SB/81 (04-05)

Appropriate Approp

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/524,504				
	Filing Date	02/14/2005				
	First Named Inventor	Cassia, Simon Hugh				
	Title	Method and Apparatus for Preloading				
	Art Unit					
	Examiner Name					
·	Attorney Docket Number	10653 002				

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	rmation unless it displays a valio ONIB control number.
Application Number	10/524,504
Filing Date	02/14/2005
First Named Inventor	Cassia, Simon Hugh
Titie	Method and Apparatus for Preloading
Art Unit	
Examiner Name	
Attorney Docket Number	10853.002

I hereby revoke all previous powers of attorney given in the above-identified application.										
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
		SIGNATURE of	Applicant or A	ssignee	of Record					
Signature	5	301				Date	19 SEP 2005			
Name	Simon [David Wood				Telephone	+44 118 973 82	20		
Title and Company	Title and Company CTO, FLYINGSPARK									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
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